## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/541308

| CLAIMS AS FILED - PART I  |  |   |  |                                   |                   |                                       |              |                        |       |                |                        |
|---|--|---|--|-----------------------------------|-------------------|---------------------------------------|--------------|------------------------|-------|----------------|------------------------|
|   |  | CLAIMS A                                  | Colum  |                                   | (Column 2)        |                                       | SMALL EN     | ———,<br>Ш.\            | OR    | OTHER<br>SMALL |                        |
| U.S. NATIONAL STAGE FEES  |  |   |  |                                   |                   |                                       | RATE         | FEE                    | 1     | RATE           | FEE                    |
| BAS   | SIC FEE  | •   | SMALL ENT                                      | . = \$ 150                        | LAR               | GE ENT. = \$ 300                      | BASIC FEE    |                        | OR    | BASIC FEE      | 3N.                    |
| EX/   | MENATION FE                                    | E   | Satisfies PCT A                                |                                   |                   | ther situations = 100 / \$ 200        | DXAM FEE     |                        |       | EXAM FEE       | 200                    |
| SE/   | VRCH FEE                                       |   | U.S. is ISA = 1<br>ALL other co<br>\$ 200 / \$ | untries =                         |                   | ther situations = -<br>3 250 / \$ 500 | SEARCH FEE   |                        |       | SEARCH FEE     | 400                    |
| FEE FOR EXTRA SPEC. PGS.  |  |   | minus 100 =                                    |                                   |                   | / 50 =                                | X \$ 125 =   |                        | 1     | X \$ 250 =     |                        |
| 701   | AL-CHARGEA                                     | BLE CLAIMS                                | 19 mi  | nus 20 =                          | •                 | - ;                                   | X \$ 25 =    |                        | OR    | X \$ 50 =      | ·                      |
| IND   | EPENDENT CL                                    | AIMS                                      | 9 п  | inus 3 =                          | • (               | ,                                     | X \$ 100 =   |                        | OR    | X \$ 200 =     | 1200                   |
| Щ.  | TIPLE DEPEN                                    | DENT CLAIM PRI                            | SENT   |                                   |                   | - 0                                   | +\$ 180 =    |                        | OR    | + \$ 360 =     |                        |
| • If the difference in column 1 is less than zero, enter "O" in column 2  |  |   |  |                                   |                   | TOTAL                                 |              | OR                     | TOTAL | 2100           |                        |
| CLAIMS AS AMENDED - PART II   |  |   |  |                                   |                   |                                       | · · .        |                        |       | OTHER          | THAN                   |
|   |  |   |  |                                   |                   | (Cotumn 3)                            | SMALL E      | NTITY                  | OR    | SMALL E        | NTITY                  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | •  | HIGH<br>NUMI<br>PREVIO<br>PAID    | BER<br>DUSLY      | PRESENT<br>EXTRA                      | RATE         | ADDI-<br>TIONAL<br>FEE |       | RATE           | ADDI-<br>TIONAL<br>FEE |
|   | Total  | • 19                                      | Minus  | . 2                               | 20                | ·                                     | X \$ 25 =    |                        | OR    | X \$ 50 =      | /                      |
|   | Independent                                    | • 9                                       | Minus.   | ***                               | 9                 | =                                     | X \$ 100 =   |                        | OR    | X \$ 200 =     |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                   |                   |                                       | + \$ 180 =   |                        | OR    | + \$ 360 =     |                        |
|   |  |   |  |                                   |                   |                                       | TOTAL ADDIT. | ,                      | OR    | TOTAL ADDIT.   |                        |
|   |  | (Column 1)                                |  | (Colun                            | าก 2)             | (Column 3)                            |              |                        |       |                | ·                      |
| MENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHI<br>NUME<br>PREVIO<br>PAID ( | ST<br>IER<br>USLY | PRESENT<br>EXTRA                      | RATE         | ADDI-<br>TIONAL<br>FEE |       | RATE           | ADDI-<br>TIONAL<br>FEE |
| NDME  | Total  | •   | Minus:   | **                                |                   | =                                     | X \$ 25 =    |                        | OR    | X \$ 50 =      | ·                      |
| AMEND   | Independent                                    | •   | Minus ·  | ***                               |                   |                                       | X \$ 100 =   |                        | OR    | X \$ 200 =     |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                   |                   |                                       | + \$ 180 =   | •                      | OR    | + \$ 360 =     |                        |
|   |  | •   | TOTAL ADDIT. FEE                               |                                   | OR                | TOTAL ADDIT.<br>FEE                   |              |                        |       |                |                        |
| •   | of the entry in colu                           | <br>Mn 1 is less than the                 | entry in column 2                              | . write <b>"0"</b> ir             | column            | .a                                    |              |                        |       |                |                        |
| * Of the entry in column 1 is less than the entry in column 2, write "O' in column 3.  ** Of the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** Of the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent is the highest number found in the annountate box is column 1. |  |   |  |                                   |                   |                                       |              |                        |       |                |                        |